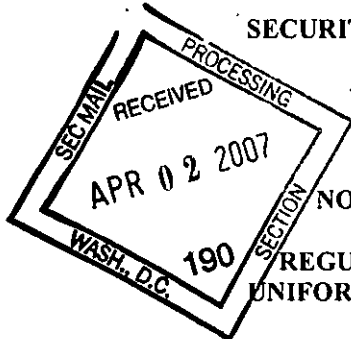


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**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

**FORM D**

**NOTICE OF SALE OF SECURITIES  
PURSUANT TO  
REGULATION D, SECTION 4(6), AND/OR  
UNIFORM LIMITED OFFERING EXEMPTION**

OMB APPROVAL	
OMB Number: 3235-0076	
Expires: April 30, 2008	
Estimated average burden hours per response... 16.00	

SEC USE ONLY	
Prefix	Serial
DATE RECEIVED	

Name of Offering ([X] check if this is an amendment and name has changed, and indicate change.)			
SourceIQ Incorporated Offering of 2,500,000 Shares of Series A-1 Convertible Preferred Stock			
Filing Under (Check box(es) that apply):	<input type="checkbox"/> Rule 504	<input type="checkbox"/> Rule 505	<input checked="" type="checkbox"/> Rule 506
	<input type="checkbox"/> Section 4(6)	<input type="checkbox"/> ULOE	
Type of Filing: <input type="checkbox"/> New Filing <input checked="" type="checkbox"/> Amendment			

A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ([ ] check if this is an amendment and name has changed, and indicate change)	
SourceIQ Incorporated	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
155 Fleet Street, Portsmouth, NH 03801	(603) 766-4929
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business:	
Developer and independent vendor of enterprise software for the executive management of source code assets	
Type of Business Organization	
<input checked="" type="checkbox"/> corporation <input type="checkbox"/> limited partnership, already formed <input type="checkbox"/> other (please specify):	
<input type="checkbox"/> business trust <input type="checkbox"/> limited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization:	Month Year <input checked="" type="checkbox"/> Actual <input type="checkbox"/> Estimated
Month Year <input type="checkbox"/> Actual <input checked="" type="checkbox"/> Estimated	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	
<input checked="" type="checkbox"/> D <input type="checkbox"/> E	



**PROCESSED**  
**APR 09 2007**  
**THOMSON FINANCIAL**

**GENERAL INSTRUCTIONS**

**Federal:**

**Who Must File:** All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

**When to File:** A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

**Where to File:** U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

**Copies Required:** Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

**Information Required:** A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

**Filing Fee:** There is no federal filing fee.

**State:**

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

**ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

*BBK*

**A. BASIC IDENTIFICATION DATA**

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

**Dunn, Roger N.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o SourceIQ Incorporated, 155 Fleet Street, Portsmouth, NH 03801**Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

**Holman, John W., III**

Business or Residence Address (Number and Street, City, State, Zip Code)

**48 Loantaka Lane North, Morristown, NH 07960**Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

**Nicewicz, Robert J.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**88 Slough Road, Harvard, MA 01451**Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

**Dowling, Michael**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o SourceIQ Incorporated, 155 Fleet Street, Portsmouth, NH 03801**Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

**Feller, Thomas**

Business or Residence Address (Number and Street, City, State, Zip Code)

**27 Merry Meeting Drive, Merrimack, NH 03054**Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

**Hubbard, Charles**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o SourceIQ Incorporated, 155 Fleet Street, Portsmouth, NH 03801**Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

**Kinnear, George E.R., II**

Business or Residence Address (Number and Street, City, State, Zip Code)

**c/o SourceIQ Incorporated, 155 Fleet Street, Portsmouth, NH 03801**

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

**A. BASIC IDENTIFICATION DATA**

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

McGurl, Daniel

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o SourceIQ Incorporated, 155 Fleet Street, Portsmouth, NH 03801

Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

Sciaky, Albert L.

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o SourceIQ Incorporated, 155 Fleet Street, Portsmouth, NH 03801

Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

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Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box ☒ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt .....	\$0	\$0
Equity .....	\$750,000	\$593,000
<input type="checkbox"/> Common <input checked="" type="checkbox"/> Preferred		
Convertible Securities (including warrants) .....	\$0	\$0
Partnership Interests .....	\$0	\$0
Other (Specify .....) .....	\$0	\$0
Total .....	\$750,000	\$593,000
Answer also in Appendix, Column 3, if filing under ULOE.		

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors .....	10	\$593,000
Non-accredited Investors .....	0	\$0
Total (for filings under Rule 504 only) .....		\$
Answer also in Appendix, Column 4, if filing under ULOE.		

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505 .....		\$
Regulation A .....		\$
Rule 504 .....		\$
Total .....		\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees .....	<input checked="" type="checkbox"/>	\$0
Printing and Engraving Costs .....	<input checked="" type="checkbox"/>	\$0
Legal Fees .....	<input checked="" type="checkbox"/>	\$12,500
Accounting Fees .....	<input checked="" type="checkbox"/>	\$2,500
Engineering Fees .....	<input checked="" type="checkbox"/>	\$0
Sales Commissions (specify finders' fees separately) .....	<input checked="" type="checkbox"/>	\$0
Other Expenses (identify) .....	<input checked="" type="checkbox"/>	\$0
Total .....	<input checked="" type="checkbox"/>	\$15,000

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

	\$735,000
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5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees .....	<input checked="" type="checkbox"/> \$60,000	<input checked="" type="checkbox"/> \$5,000
Purchase of real estate .....	<input checked="" type="checkbox"/> \$0	<input checked="" type="checkbox"/> \$0
Purchase, rental or leasing and installation of machinery and equipment .....	<input checked="" type="checkbox"/> \$0	<input checked="" type="checkbox"/> \$0
Construction or leasing of plant buildings and facilities.....	<input checked="" type="checkbox"/> \$0	<input checked="" type="checkbox"/> \$0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) .....	<input checked="" type="checkbox"/> \$0	<input checked="" type="checkbox"/> \$0
Repayment of indebtedness .....	<input checked="" type="checkbox"/> \$15,000	<input checked="" type="checkbox"/> \$0
Working capital .....	<input checked="" type="checkbox"/> \$0	<input checked="" type="checkbox"/> \$99,000
Other (specify): <u>Operating expenses</u> .....	<input checked="" type="checkbox"/> \$0	<input checked="" type="checkbox"/> \$551,000
Column Totals .....	<input checked="" type="checkbox"/> \$75,000	<input checked="" type="checkbox"/> \$655,000
Total Payments Listed (column totals added) .....	<input checked="" type="checkbox"/> \$735,000	

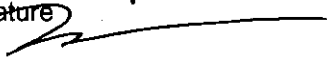
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**D. FEDERAL SIGNATURE**

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

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Issuer (Print or Type) <b>SourceIQ Incorporated</b>	Signature 	Date <b>March 1, 2007</b>
Name of Signer (Print or Type) <b>Michael Dowling</b>	Title of Signer (Print or Type) <b>Vice President and Chief Financial Officer</b>	

<b>ATTENTION</b>
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<b>Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001)</b>
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**END**